

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO. **107030173**

FILING DATE  
**31 JAN 2002**

APPLICANT(S)

*Putter*

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			/			
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TOTAL IND.			1			
TOTAL DEP.						
TOTAL CLAIMS			13			

  

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